

## PREFACE

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The surge in medical out-of-pocket expenditures (OOPE) incurred by households and individuals, particularly in low and moderate-income countries (LMICs), is a pressing issue. OOPE for medicines is the most inequitable form of medical care financing, representing a significant obstacle to universal health coverage (UHC). High OOPE often forces individuals to forego essential medical care or face financial instability, with pharmaceutical expenses constituting a substantial portion of these costs. In LMICs, up to 56% of healthcare budgets are spent on medications.

India, with a population of approximately 1.40 billion, faces significant challenges in healthcare delivery, exacerbated by urbanization and demographic shifts toward non-communicable diseases (NCDs). The healthcare system is overburdened, with OOPE on medicines accounting for 70% of total healthcare expenditure. Public policy plays a crucial role in addressing OOPE, yet many households lack access to affordable healthcare, resulting in financial crises.

Tuberculosis (TB) remains a major infectious disease, with India experiencing high incidence rates. The limited affordability of TB treatment, coupled with high OOPE and inadequate health infrastructure, hampers efforts to achieve universal health coverage. Various national initiatives aim to reduce OOPE and improve medicine availability but are overshadowed by the growing needs of a large population.

The financial burden of pregnancy and childbirth in India is influenced by socioeconomic and demographic factors, with a significant portion of OOPE related to maternity services. The high costs associated with prenatal and postnatal care disproportionately impact lower-income groups, revealing the need for effective policy interventions. Geographic disparities in

healthcare access further exacerbate these challenges, emphasizing the necessity for expanded insurance coverage and support programs.

India's public drug procurement and distribution system faces numerous challenges, influenced by diverse regional strategies and complex state-specific policies. Inefficiencies and quality issues are prevalent due to inadequate regulation and fragmented frameworks. Evaluating these procurement processes is essential, focusing on efficiency, cost-effectiveness, and quality to enhance drug availability and public confidence.

Given the facts, this integrated study aims to holistically examine the multifaceted challenges surrounding healthcare access and medication distribution in India. The specific objectives of this integrated study include

- ***Study 1 - On Financial Burden of Medicines:*** To evaluate the impact of government efforts to reduce out-of-pocket expenditures for medicines in India (Systematic way of data synthesis based on published evidence).
- ***Study 2 - On TB Drug Therapy Challenges:*** To explore socioeconomic and health policy challenges concerning the availability, accessibility, and affordability of quality drug therapy among people living with tuberculosis.
- ***Study 3 - On Financial Considerations in Pregnancy Outcomes:*** To assess the impact of financial considerations on pregnancy outcomes and enhance healthcare access for expectant mothers.
- ***Study 4 - On Public Drug Procurement Performance:*** To conduct a performance assessment of public drug procurement across seven different states from diverse geographic regions in India, focusing on procurement efficiency, cost-effectiveness, and the quality of distribution systems.